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DATE: October 15, 2007

PTO IDENTIFIER: Application Number 10/675,406-Conf. #7796

Patent Number

Inventor: Deepa Eveleigh et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: EDWARDS ANGELL PALMER & DODGE LLP

Gabriel J. McCool

PHONE: (203) 975-7505

Attorney Dkt. #: 5138 [66816(S4716)]

PAGES (including Cover Sheet): 6

CONTENTS:

Two-Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
(Note: 1 month time extension was previously paid. Total EOT due = \$340.00)

Notice of Appeal (1 page)

Transmittal (1 page)

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Telephone: (617) 239-0100 Facsimile: (617) 227-4420

PAGE 1/6 * RCVD AT 10/15/2007 2:25:08 PM [Eastern Daylight Time] * SVR:USPTO-EFAXRF-3/18 * DNIS:2738300 * CSID: * DURATION (mm-ss):01:40

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Application No. (if known): 10/875,408/CONF. # 7768

Attorney Docket No.: 5138 [86816/54716]

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Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page) (Note: 1 month time extension was previously paid. Total EOT due = \$340.00)

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TRANSMITTAL FORM	
Application Number	10/675,406-Conf. #7796
Filing Date	September 30, 2003
First Named Inventor	Deepa Eveleigh
Art Unit	1642
Examiner Name	C. Joyce
Attorney Docket Number	5138 [66816(54716)]
(to be used for all correspondence after initial filing)	
Total Number of Pages in This Submission	

ENCLOSURES (Check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request **	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscaps Table on CD
<input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.55	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Answer, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (Please identify below): Fax Transmission/Certificate of fax transmission (2 pages)
Remarks	
**Note: A 1 month time extension was previously paid. Total EOT due with this response is \$340.00	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP
Signature	<i>Edw. J. McCool</i>
Printed name	Gabriel J. McCool
Date	October 15, 2007
Reg. No.	58,423

No. 0019 P. 3

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No. 0019 P. 4

FEE TRANSMITTAL For FY 2007		Application Number 10/875,408-Conf. #7786	
Filing Date September 30, 2003		First Named Inventor Deepa Eveleigh	
Examiner Name C. Joyce		Art Unit 1842	
Attorney Docket No. 5138 [08818(54718)]			
TOTAL AMOUNT OF PAYMENT (\$)		850.00	
METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Note <input type="checkbox"/> Other (please identify):			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angel Palmer & Dodge LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			
<input checked="" type="checkbox"/> Credit any overpayments			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500
Design	200	100	300
Plant	200	100	300
Reissue	300	150	500
Provisional	200	100	300
2. EXCESS CLAIM FEES			
Fee Description			
Each claim over 20 (including Reissues)			
Multiple dependent claim over 3 (including Reissues)			
Multiple dependent claims			
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
14	40	1400	5600
3. APPLICATION SIZE FEE			
If the specification and drawings exceed (0) sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$125 for small entity for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.166.			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
100	50	(round up to a whole number) x	6250
4. OTHER FEES			
Non-English Specification, \$130 fee (no small entity discount)			
Other (e.g., late filing surcharge): 1252 Extension for response within second month***			
1401 Notice of appeal			
*** A one-month extension of time fee was previously paid - EOT fee due with this response is \$340.00			
SUBMITTED BY			
Signature	Registration No.	Telephone	(203) 875-7505
Gabriel J. Miccoli	58,423	Date	October 15, 2007

237-97

Oct. 15, 2007 2:26PM Edwards Angel Palmer & Dodge

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